

DOCKET NO. 6001-002-52

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

IN RE APPLICATION OF: Raymond F. RATCLIFF, III, et al. ART UNIT: 2121

SERIAL NO.: 09/853,841

EXAMINER: Joseph P. Hirl

FILING DATE: May 11, 2001

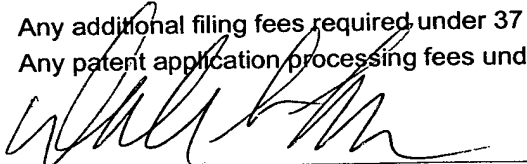
FOR: METHOD AND APPARATUS FOR PROVIDING A REWARD FOR THE  
USE OF A PROCESSOR IN A PARALLEL PROCESSING ENVIRONMENT

**AMENDMENT**

ASSISTANT COMMISSIONER FOR PATENTS  
PO BOX 1450  
ALEXANDRIA, VA 22313-1450

SIR:

Responsive to the outstanding Office Action dated June 14, 2004, entry of the following  
amendments is respectfully requested.

<b>AMENDMENT TRANSMITTAL LETTER (Small Entity)</b>				Docket No. <b>6001-002-52</b>	
Applicant(s): <b>Raymond F. RATCLIFF, III, et al.</b>					
Application No. <b>09/853,841</b>	Filing Date <b>May 11, 2001</b>	Examiner <b>Joseph P. Hirl</b>	Customer No.	Group Art Unit <b>2121</b>	Confirmation No. <b>6728</b>
Invention: <b>METHOD AND APPARATUS FOR PROVIDING A REWARD FOR THE USE OF A PROCESSOR IN A PARALLEL PROCESSING ENVIRONMENT</b>					
<u>COMMISSIONER FOR PATENTS:</u>					
Transmitted herewith is an amendment in the above-identified application.					
<input checked="" type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27					
The fee has been calculated and is transmitted as shown below.					
<b>CLAIMS AS AMENDED</b>					
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST # PREV. PAID FOR	NUMBER EXTRA CLAIMS PRESENT	RATE	ADDITIONAL FEE
TOTAL CLAIMS	26 -	24 =	2 x	\$25.00	\$50.00
INDEP. CLAIMS	3 -	3 =	0 x	\$43.00	\$0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>					\$0.00
<b>TOTAL ADDITIONAL FEE FOR THIS AMENDMENT</b>					<b>\$50.00</b>
<input type="checkbox"/> No additional fee is required for amendment. <input type="checkbox"/> Please charge Deposit Account No. _____ in the amount of _____ <input checked="" type="checkbox"/> A check in the amount of <b>\$955.00</b> to cover the filing fee is enclosed. <input checked="" type="checkbox"/> The Director is hereby authorized to charge payment of the following fees associated with this communication or credit any overpayment to Deposit Account No. _____ <input checked="" type="checkbox"/> Any additional filing fees required under 37 C.F.R. 1.16. <input checked="" type="checkbox"/> Any patent application processing fees under 37 CFR 1.17.					
 Signature			Dated: <b>December 14, 2004</b>		
<b>Dale S. Lazar</b> <b>Registration No. 28,872</b> <b>PIPER RUDNICK LLP</b> <b>P.O. Box 9271</b> <b>Reston, VA 20195</b>			I certify that this document and fee is being deposited on _____ with the U.S. Postal Service as first class mail under 37 C.F.R. 1.8 and is addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.		
			Signature of Person Mailing Correspondence		
			Typed or Printed Name of Person Mailing Correspondence		
CC:					